

NOTE: ALL SHEETS MUST BE REVIEWED

DEPARTMENT OF PERMITTING, ENVIRONMENT AND REGULATORY AFFAIRS

Herbert S. Saffir Permitting and Inspection Center

11805 SW 26th Street (Coral Way), • Miami, Florida 33175-2474 • (786) 315-2100

PERMIT APPLICATION

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02013054638

IF SUBSIDIARY PROVIDE MASTER PERMIT NUMBER HERE			
LOCATION OF IMPROVEMENTS	Job Address <u>10338 SW 107th Ave</u>		CONTRACTOR INFORMATION
	Folio <u>3040080420010</u>		
TYPE OF IMPROVEMENTS	Lot _____ Block _____		Contractor No. <u>ES0000406</u>
	Subdivision _____ PBpg _____		
PERMIT TYPE	Metes and bounds _____		Last four (4) digits of Qualifier No. <u>7496</u>
	[] New Construction on Vacant Land [] Enclosure [] Repair		
PERSON TO PICK UP PLANS	[] Alteration Interior [] Repair Due to Fire		Contractor Name <u>Erwin Sredni</u>
	[] Alteration Exterior [] Demolish		
BONDING	[] Relocation of Structure [] Shell Only		Qualifier Name <u>Nolana Sredni</u>
	[] Short Term Event [] Addition Attached		
OWNER'S NAME	[] New Roof [] Addition Detached		Address <u>7220 NW 1st Court</u>
	[] Recovery (Roof) [] Re-Roof		
ARCHITECT	[] Permit by Affidavit [] Foundation Only		City <u>Miami</u> State <u>FL</u> Zip <u>33180</u>
	[] Building* Category <u>03</u> [] Chg. Contractor		
MORTGAGE	[] Electrical [] Re-Issue		Current use of property <u>Commercial</u>
	[] Mechanical [] Extension		
NAME	[] Plumbing [] Supplement		Description of Work <u>Letters on Railway</u>
	[] LPGX [] Reinspection		
ADDRESS	[] Building* Category <u>03</u> [] Chg. Contractor		Sq. Ft. <u>21</u> Units <u>1</u> Floors _____
	[] Electrical [] Re-Issue		
CITY	[] Mechanical [] Extension		Value of Work <u>\$ 500.00</u>
	[] Plumbing [] Supplement		
PHONE	[] LPGX [] Reinspection		Owner <u>Saddleridge Holdings LLC</u>
	[] Building* Category <u>03</u> [] Chg. Contractor		
NAME	[] Electrical [] Re-Issue		Address <u>2875 NE 191st Street</u>
	[] Mechanical [] Extension		
ADDRESS	[] Plumbing [] Supplement		City <u>Aventura</u> State <u>FL</u> Zip <u>33180</u>
	[] LPGX [] Reinspection		
CITY	[] Building* Category <u>03</u> [] Chg. Contractor		Phone <u>305-945-0405</u>
	[] Electrical [] Re-Issue		
PHONE	[] Mechanical [] Extension		Last four (4) digits of Owner's Social Security No. _____
	[] Plumbing [] Supplement		
NAME	[] LPGX [] Reinspection		Name _____
	[] Building* Category <u>03</u> [] Chg. Contractor		
ADDRESS	[] Electrical [] Re-Issue		Barcode
	[] Mechanical [] Extension		
CITY	[] Plumbing [] Supplement		0000716780
	[] LPGX [] Reinspection		
PHONE	[] Building* Category <u>03</u> [] Chg. Contractor		Phone _____
	[] Electrical [] Re-Issue		

* See reverse side for Building Category

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for ELECTRICAL, PLUMBING, SIGNS, POOLS, MECHANICAL, WINDOW, SHUTTERS and ROOFING WORK and there may be additional permits required for other governmental entities.

OWNER'S/PERMIT APPLICANT AFFIDAVIT I certify that all of the foregoing information is accurate and that I have no unpaid civil penalties, administrative hearing cost investigative, enforcement, testing or monitoring costs or unpaid liens which are owed to Miami-Dade County.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY IF YOU INTEND TO OBTAIN FINANCING. CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

"The issuance of the permit does not relieve the property owner from obtaining homeowner's association approval (if required) prior to beginning any work and in no way authorizes work that is in violation of any association rule or regulation."

Signature of Owner or Owner's Agent

PRINT NAME Erwin Sredni

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 4th

day of January, 2013

by Erwin Sredni

Signature of Notary Public Michelle Delahaye

Print Name Michelle Delahaye

(SEAL)

Personally known ☒

or Produced Identification _____

Signature of Qualifier Nolana Sredni

PRINT NAME Nolana Sredni

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 2

day of 2013

by _____

Signature of Notary Public Exia Toledo

Print Name Exia Toledo

(SEAL)

Personally known _____

or Produced Identification _____



MICHELLE DELAHAYE

MY COMMISSION # EE841297

EXPIRES October 07, 2016

(407) 388-0153

FloridaNotaryService.com